BUILDING ANALYSIS SCHEDULE

1. BUILDING NO._____ 2. BLOCK NO._____

3. TRACT_____ 4. CITY_____

5. NAME OF BUILDING____*Administration*____

6. STREET ADDRESS OF BUILDING____*2430 E ST. N.W.*____

7. PERSON IN CHARGE
OF BUILDING
(OWNER OR AGENT)
    a. NAME ██████████████████ *Rm II*   STATINTL

    b. ADDRESS____*Adm. Bldg.*____

8. PERSON SUPPLYING
INFORMATION FOR
THIS FORM
    a. NAME_____

    b. ADDRESS_____

    c. TITLE_____ d. PHONE NO._____

9. PRINCIPAL USE:

(1) ☑ OFFICE BUILDING   (5) ☐ SCHOOL   (9) ☐ THEATER

(2) ☐ HOTEL   (6) ☐ FACTORY   (10) ☐ OTHER_____

(3) ☐ APARTMENT BUILDING   (7) ☐ HOSPITAL

(4) ☐ STORE   (8) ☐ CHURCH

10. THIS BUILDING WAS BUILT IN_____ 11. IT CONTAINS *2* STORIES 12. AND IS_____ FT. HIGH
    (year)   (about)

13. HOURS OF OPERATION AND OCCUPANCY

HOURS BUILDING IS OPEN		HOURS OF NORMAL PEAK OCCUPANCY		NUMBER OF PERSONS AT NORMAL PEAK OCCUPANCY
Mon.-Fri. *8:30* AM TO *5:* PM	☐ ALL HOURS	___ AM TO ___ PM	☐ ALL HOURS	████
Saturday ___ AM TO ___ PM	☐ ALL HOURS	___ AM TO ___ PM	☐ ALL HOURS	████
Sunday-Holidays ___ AM TO ___ PM	☐ ALL HOURS	___ AM TO ___ PM	☐ ALL HOURS	████

STATINTL

14. ANY STORAGE OF LARGE AMOUNTS OF EXPLOSIVE OR INFLAMMABLE MATERIAL IN THIS OR ANY ADJACENT BLOCK?

☑ NO

☐ YES - SPECIFY_____

_____

15. WALLS, FLOORS AND ROOF

	THICK-NESS (in.)	PRINCIPAL MATERIAL
1. EXTERIOR WALLS		*stone*
2. INTERIOR WALLS		*masonry*
3. PARTITIONS		"
4. FLOORS		*Reinf. concrete*
5. ROOF		*SLATE*

16. THIS BUILDING IS OF THE FOLLOWING TYPE OF CONSTRUCTION:

GROUP A
(1) ☐ STEEL FRAMED
(2) ☑ REINFORCED CONCRETE FRAMED

GROUP B
(3) ☐ SEMI-FRAMED (STEEL OR REINFORCED CONCRETE)
(4) ☐ MASONRY WALL BEARING
(5) ☐ WOOD FRAME (MASONRY OR WOOD OR OTHER COVERING)
(6) ☐ OTHER_____

BASEMENT (IF ANY) AND FOR ALL STORIES EXCEPT THE TOP THREE. COMPLETE ALL ITEMS FOR
EACH SELECTED POTENTIAL SHELTER AREA. COMPLETE ITEMS 35, 36 AND 37 FOR TOP THREE
STORIES AS WELL.

ITEMS WITH AN ASTERISK (*) ARE TO BE ANSWERED "YES" OR "NO"

17. STORY NUMBER		SUB-BASEMENT		BASEMENT		1st STORY		2nd STORY		3rd STORY	
18. POTENTIAL SHELTER AREAS		1	2	1	2	1	2	1	2	1	2
19. NORMAL USE? (SEE CODE)				H							
20. SQUARE FEET OF USABLE SPACE				■							
21. GLASS HAZARD IN WALLS AROUND SHELTER AREA?*				none							
22. HUNG CEILING OVER SHELTER AREA?*				no							
23. HEAVY CEILING FIXTURES OVER SHELTER AREA?*				none							
24. HEAVY SAFES, FILES, MACHINES, ETC. ABOVE SHELTER AREA?*				none							
25. STEAM PIPES OVER 3" IN DIAMETER OR BOILER IN AREA?*				none							
26. WATER OR GAS PIPES OVER 3" IN DIAMETER IN AREA?*				none							
27. DISTANCE IN FEET TO OUTER WALL ON--	NORTH			8'							
	EAST			22'							
	SOUTH			22'							
	WEST			12'							
28. NUMBER OF PERMANENT WALLS INCLUDING OUTER WALL TOWARD--	NORTH			2							
	EAST			2							
	SOUTH			2							
	WEST			2							
29. IS THE OUTER WALL ON THIS STORY BELOW GROUND OR AGAINST ANOTHER BUILDING ON THE--*	NORTH			yes							
	EAST			"							
	SOUTH			"							
	WEST			"							
30. PERCENTAGE OF WINDOW SPACE ON OUTER WALLS ON--	NORTH			5 %							
	EAST			"							
	SOUTH			"							
	WEST			"							
31. ARE THERE EXITS ON TWO OR MORE SIDES OF BLDG?*		XXX		yes				XXX		XXX	
32. NUMBER OF STAIRWAYS AGAINST OUTER WALL				XXX		XXX					
33. NUMBER OF STAIRWAYS IN INTERIOR				XXX		XXX					
34. NUMBER OF FLOORS INCLUDING ROOF ABOVE THIS STORY				3							
35. NUMBER OF WORKERS OR RESIDENTS ON THIS STORY				■							
36. NUMBER OF TRANSIENTS ON THIS STORY				■							
37. TOTAL (Item 35 Plus Item 36)				■							
38. OFFICE USE ONLY				■							
39. OFFICE USE ONLY				■							
40. OFFICE USE ONLY											

25X1A

STATINTL

... POTENTIAL SHELTER AREAS IN SUB-BASEMENT AND BASEMENT ONLY AND COMPLETE ALL ITEMS FOR EACH.

IF THERE IS NO SUB-BASEMENT OR NO BASEMENT IN THE BUILDING, ENTER "NONE" ACROSS TOP OF COLUMN.

4th STORY		5th STORY		6th STORY		7th STORY		8th STORY		9th STORY		10th STORY					
1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX	

EVALUATION BY_____

DATE_____

GPO 83-19848